REMARKS

I. Status Summary

Claims 1-78 are pending in the present application. Claims 1-78 presently stand rejected. Further, claims 1-78 have been amended.

The paragraph beginning at page 27, line 23, has been amended to replace "Figure 10" with "Figure 11" for correcting a typographical error. The paragraph includes references to the block numbers and text appearing in Figure 11. Accordingly, applicants respectfully submit that it should be apparent that the paragraph actually refers to Figure 11.

The paragraph beginning at page 26, line 9, has been amended to add reference numerals 603a-n and 604a-n as shown in Figure 8.

Further, the specification has been amended to add appropriate headings.

Figure 5 has been amended to include reference numeral **450** to refer to the network computer system. Support for the amendment to Figure 5 is provided in the application as filed, for example, by claim 24, lines 16-24.

II. Claim Objections

Claim 72 stands objected to because of informalities. In particular, the Examiner states that claim 72 recites "a network computer system" of claim 1 while claim 1 recites "a network computer system". The Examiner suggests replacing "a network computer system" in claim 72 to "the network computer system". Claim 72

has been amended as suggested by the Examiner. Accordingly, applicants respectfully submit that the objection to claim 72 should be withdrawn.

III. Claim Rejection Under 35 U.S.C. § 102

Claims 1-8, 14-19, 22-28, 32-44, 46-50, 60-68, and 72-77 stand rejected under 35 U.S.C. § 102(e) as being anticipated by U.S. Patent No. 6,044,382 to Martino (hereinafter, "Martino"). This rejection is respectfully traversed.

Claim 1 as amended recites a system for collecting and providing selective access to medical data relevant to plural patients having related medical conditions. The system includes a network computer system. For example, Figure 3 shows a system including a network computer system **250**. A first patient-specific database and a second condition-specific database are associated with the network computer system. Referring to Figure 7, for example, databases **603a-n** can contain patient personal data, and databases **604a-n** can contain patient data relating to the medical condition of a corresponding patient. Claim 1 recites that plural patient electronic data collectors are remote from the network computer system. Each of the data collectors is adapted for collecting first and second patient data relevant to a particular patient's medical condition. The first patient data comprises patient personal data, and the second patient data comprises patient data relating to the medical condition of the patient.

Further, claim 1 recites a communicator for communicating with an entrypoint to the network computer system to enable transfer of the first patient data to the first

patient-specific database and to enable transfer of the second patient data to the second condition-specific database. A first secure access gateway permits access to the first patient-specific database in response to a first user authorisation command. A second secure access gateway permits access to the second condition-specific database in response to a second user authorisation command. The claimed system can be beneficial, for example, because different levels of user authorisation may be established to allow different users to access each part of the database structure. Summarily, Martino fails to disclose each and every feature recited by amended claim 1.

Martino discloses a data transaction entry device **12** shown in Figures 1 and 5A that may be used for communicating a patient's medical information to a remote party, such as an insurance company. (See column 26, lines 42-65, of Martino). For example, the patient's name, the date, a description of patient symptoms, and the like may be communicated. (See column 26, lines 56-63, of Martino). Further, at column 29, lines 27-54, Martino discloses monitoring patient condition for change at a server **302**, and taking action based on changes in the patient's condition. Device **12** can communicate with server **302** via a modem. (See column 28, lines 42-51, of Martino).

The Examiner refers to column 24, lines 55-67, as disclosing the claim 1 feature of first and second secure access gateways for permitting access to the first patient-specific database and the second condition-specific database, respectively, in response to the first and second user authorisation commands, respectively. Referring to this portion, Martino discloses that a security form for password entry

may be provided to a user for maintaining security. (See column 24, lines 55-57, of Martino). Different security levels may be presented to the user. (See column 24, line 66, to column 25, line 4, of Martino). Particularly, Martino describes this security feature as being particularly useful in the context of home banking. (See column 25, lines 2-4, of Martino).

Martino fails to disclose a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. There is no disclosure in Martino of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. Martino describes communicating different types of patient data from a device to a remote system. However, there is no disclosure in Martino of the claim 1 feature of transferring the data to different databases.

Moreover, Martino fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Regarding system security, Martino discloses that a security form for password entry may be provided to a user for maintaining security. (See column 24, lines 55-57, of Martino) and different security levels may be presented to the user. (See column 24, line 66, to column 25, line 4, of Martino). Particularly, Martino describes this security feature as being particularly useful in the context of home banking. (See column 25, lines 2-4, of Martino). However, there is no disclosure of

the claim 1 feature of providing different secure accesses to different patient medical data. Particularly, there is no disclosure of permitting different access to patient personal data and patient medical condition data contained in different databases as recited by claim 1.

For the reasons set forth above, Martino fails to disclose each and every feature recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1 and its dependent claims 2-8, 14-19, 22-28, 32-44, 46-50, 60, 61, 72, and 73 under 35 U.S.C. § 102(e) should be withdrawn and the claims allowed at this time.

Claim 62 includes features similar to claim 1. In particular, claim 62 recites collecting first and second patient data relevant to each patient's medical condition in electronic form. Claim 62 has been amended to recite that the first patient data comprises patient personal data, and the second patient data comprising patient data relating to the medical condition of the patient. Further, claim 62 has been amended to recite communicating with an entrypoint to a network computer system to enable transfer of the first patient data to a first patient-specific database and to enable transfer of the second patient data to a second condition-specific database of the network computer system. For the reasons set forth above with respect to claim 1, Martino fails to disclose each and every feature recited by claim 62. Accordingly, applicants respectfully submit that the rejection of claim 62 and its dependent claims 63-68 under 35 U.S.C. § 102(e) should be withdrawn and the claims allowed at this time.

Claim 74 includes features similar to claim 1. In particular, claim 74 recites receiving first and second patient data relevant to each patient's medical condition collected automatically at a plurality of locations. Claim 74 has been amended to recite that the first patient data comprises patient personal data, and the second patient data comprises patient data relating to the medical condition of the patient. Further, claim 74 recites allowing access to the first database in response to a first user authorisation command, and allowing access to the second database in response to a second user authorisation command. For the reasons set forth above with respect to claim 1, Martino fails to disclose each and every feature recited by claim 74. Accordingly, applicants respectfully submit that the rejection of claim 74-76 and its dependent claims 63-68 under 35 U.S.C. § 102(e) should be withdrawn and the claims allowed at this time.

Claim 77 includes features similar to claim 1. In particular, claim 77 recites receiving first and second patient data relevant to each patient's medical condition collected automatically at a plurality of locations. Claim 77 has been amended to recite that the first patient data comprises patient personal data, and the second patient data comprises patient data relating to the medical condition of the patient. Further, claim 77 recites allowing access to the first database in response to a first user authorisation command, and allowing access to the second database in response to a second user authorisation command. For the reasons set forth above with respect to claim 1, Martino fails to disclose each and every feature recited by

claim 77. Accordingly, applicants respectfully submit that the rejection of claim 77 under 35 U.S.C. § 102(e) should be withdrawn and the claim allowed at this time.

IV. Claim Rejection Under 35 U.S.C. § 103

Claims 9-13 and 36 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of U.S. Patent Application Publication No. 2002/0049389 to Abreu (hereinafter, "Abreu"). Further, claims 20 and 21 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of legal precedent. Claims 29, 30, and 69-71 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of U.S. Patent No. 6,012,035 to Freeman et al. (hereinafter, "Freeman"). Further, claim 31 stands rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of U.S. Patent No. 5,721,777 to Blaze (hereinafter, "Blaze"). Claim 45 stands rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of U.S. Patent No. 7,138,902 to Menard (hereinafter, "Menard"). Further, claims 51-59 and 78 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Martino in view of U.S. Patent No. 6,349,724 to Burton (hereinafter, "Burton"). These rejections are respectfully traversed as described below.

IV.A. Rejection of Claims 9-13 and 36

Claims 9-13 and 36 depend upon claim 1. Therefore, claims 9-13 and 36 include the features recited by claim 1. For the reasons set forth above, Martino fails

to disclose the claim 1 features of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, Martino fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. Martino also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that Martino also fails to suggest these claim 1 features.

Abreu fails to overcome the significant shortcomings of Martino. Abreu discloses detecting physical and chemical parameters of the body and the eye utilizing a contact device placed on the eye with signals being transmitted continuously as electromagnetic waves, radio waves, sound waves, infrared and the like. (See paragraph 0102, of Abreu). Several parameters can be detected with the invention including a complete non-invasive analysis of blood components, measurement of systemic and ocular blood flow, measurement of heart rate and respiratory rate, tracking operations, detection of ovulation, detection of radiation and drug effects, diagnosis of ocular and systemic disorders and the like. (See paragraph 0102, of Abreu). Abreu fails, however, to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in Abreu of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by

amended claim 1. Abreu also fails to disclose or suggest the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that Martino and Abreu, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claims 9-13 and 36 under 35 U.S.C. § 103(a) should be withdrawn and the claims allowed at this time.

IV.B. Rejection of Claims 20 and 21

Claims 20 and 21 depend upon claim 1. Therefore, claims 20 and 21 include the features recited by claim 1. For the reasons set forth above, Martino fails to disclose the claim 1 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, Martino fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. Martino also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that Martino also fails to suggest these claim 1 features. Further, applicants respectfully submit that it would not have been obvious to one of ordinary

skill in the art to provide the separate databases with different accesses for patient-specific database and condition-specific database, as recited by claim 1.

For the reasons set forth above, applicants respectfully submit that <u>Martino</u> and legal precedent in combination fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claims 20 and 21 under 35 U.S.C. § 103(a) should be withdrawn and the claims allowed at this time.

IV.C. Rejection of Claims 29, 30, 69-71

Claims 29 and 30 depend upon claim 1. Therefore, claims 29 and 30 include the features recited by claim 1. For the reasons set forth above, <u>Martino</u> fails to disclose the claim 1 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, <u>Martino</u> fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. <u>Martino</u> also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that <u>Martino</u> also fails to suggest these claim 1 features.

<u>Freeman</u> fails to overcome the significant shortcomings of <u>Martino</u>. <u>Freeman</u> discloses monitoring and managing a cooperative health care provision system through a management service. (See column 3, lines 35-37, of <u>Freeman</u>). However,

Freeman fails to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in Freeman of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. Freeman also fails to disclose or suggest the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that Martino and Freeman, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claims 29 and 30 under 35 U.S.C. § 103(a) should be withdrawn and the claims allowed at this time.

Claims 69-71 depend upon claim 62. Therefore, claims 69-71 include the features recited by claim 62. For the reasons set forth above, Martino fails to disclose the claim 62 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, Martino fails to disclose the claim 62 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. Martino also fails to disclose the claim 62 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-

specific database in response to different user authorisation commands. Applicants respectfully submit that <u>Martino</u> also fails to suggest these claim 62 features.

<u>Freeman</u> fails to overcome the significant shortcomings of <u>Martino</u>. <u>Freeman</u> discloses monitoring and managing a cooperative health care provision system through a management service. (See column 3, lines 35-37, of <u>Freeman</u>). However, <u>Abreu</u> fails to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in <u>Freeman</u> of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. <u>Freeman</u> also fails to disclose or suggest the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that <u>Martino</u> and <u>Freeman</u>, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claims 9-13 and 36 under 35 U.S.C. § 103(a) should be withdrawn and the claims allowed at this time.

IV.D. Rejection of Claim 31

Claim 31 depends upon claim 1. Therefore, claim 31 includes the features recited by claim 1. For the reasons set forth above, <u>Martino</u> fails to disclose the claim

1 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, <u>Martino</u> fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. <u>Martino</u> also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that <u>Martino</u> also fails to suggest these claim 1 features.

<u>Blaze</u> fails to overcome the significant shortcomings of <u>Martino</u>. <u>Blaze</u> discloses encrypting medical records by use of a key. (See column 7, lines 45-57, of <u>Blaze</u>). However, <u>Blaze</u> fails to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in <u>Blaze</u> of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. <u>Blaze</u> also fails to disclose or suggest the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that <u>Martino</u> and <u>Blaze</u>, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's

dependent claim 31 under 35 U.S.C. § 103(a) should be withdrawn and the claim allowed at this time.

IV.E. Rejection of Claim 45

Claim 45 depends upon claim 1. Therefore, claim 45 includes the features recited by claim 1. For the reasons set forth above, Martino fails to disclose the claim 1 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, Martino fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. Martino also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that Martino also fails to suggest these claim 1 features.

Menard fails to overcome the significant shortcomings of Martino. Menard discloses using spread spectrum radiofrequency signals. (See column 7, lines 14-48, of Menard). However, Menard fails to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in Menard of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. Menard also fails to disclose or suggest the claim 1 feature of different secure

access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that Martino and Menard, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claim 45 under 35 U.S.C. § 103(a) should be withdrawn and the claim allowed at this time.

IV.F. Rejection of Claims 51-59 and 78

Claims 51-59 and 78 depend upon claim 1. Therefore, claim 45 includes the features recited by claim 1. For the reasons set forth above, Martino fails to disclose the claim 1 feature of separate patient-specific and condition-specific databases relating to a particular patient's medical condition. Further, Martino fails to disclose the claim 1 feature of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases. Martino also fails to disclose the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands. Applicants respectfully submit that Martino also fails to suggest these claim 1 features.

Burton fails to overcome the significant shortcomings of Burton. Burton discloses a gas compression and delivery device for treatment of sleep disorders.

(See column 2, lines 26 and 27, and the Abstract, of Burton). However, Burton fails to disclose or suggest a patient-specific database and a condition-specific database relating to a particular patient's medical condition as recited by amended claim 1. Further, there is neither disclosure nor suggestion in Burton of enabling the transfer of particular patient's personal data and data relating to patient's medical condition to the separate databases as recited by amended claim 1. Burton also fails to disclose or suggest the claim 1 feature of different secure access gateways providing different accesses to the patient-specific database and the condition-specific database in response to different user authorisation commands.

For the reasons set forth above, applicants respectfully submit that Martino and Burton, alone or in combination, fail to disclose or suggest the features recited by claim 1. Accordingly, applicants respectfully submit that the rejection of claim 1's dependent claims 51-59 and 78 under 35 U.S.C. § 103(a) should be withdrawn and the claims allowed at this time.

CONCLUSION

In light of the above Amendments and Remarks, it is respectfully submitted that the present application is now in proper condition for allowance, and an early notice to such effect is earnestly solicited.

If any small matter should remain outstanding after the Patent Examiner has had an opportunity to review the above Remarks, the Patent Examiner is respectfully requested to telephone the undersigned patent attorney in order to resolve these matters and avoid the issuance of another Official Action.

DEPOSIT ACCOUNT

The Commissioner is hereby authorized to charge any fees associated with the filing of this correspondence to Deposit Account No. **50-0426**.

Respectfully submitted,

JENKINS, WILSON, TAYLOR & HUNT, P.A.

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